

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVS2176AGC</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>09/01/2009</b>
NAME OF PROVIDER OR SUPPLIER  <b>ST JUDE HOME CARE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>6880 HATHAWAY DRIVE LAS VEGAS, NV 89115</b>		
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Y 000	Initial Comments  The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.  This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted at your facility on 9/1/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.  The facility was licensed for six Residential Facility for Group beds for elderly and disabled persons, Category II residents. The census at the time of the survey was five. Five resident files were reviewed and three employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of D.  The following deficiencies were identified:	Y 000		
Y 088 SS=C	4493199(4) Staffing Schedule  NAC 449.199 4. The administrator of a residential facility shall maintain monthly a written schedule that includes the number and type of members of the staff of the facility assigned for each shift. The schedule must be amended if any changes are made to the schedule. The schedule must be retained for at least 6 months after the schedule expires.  This Regulation is not met as evidenced by: Based on record review and interview on 9/1/09, the administrator failed to maintain a monthly staffing schedule that needs to be retained for at	Y 088		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 088	Continued From page 1  least six months. Employee #1 could not find a current staffing schedule, the only schedules provided were from 2007.  Severity: 1      Scope: 3	Y 088		
Y 105 SS=F	449.200(1)(f) Personnel File - Background Check  NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive.  This Regulation is not met as evidenced by: Based on record review on 9/1/09, the facility failed to ensure 2 of 3 Employees had background checks completed (Employee #1 and #3). Employee #1 failed to provide evidence of an FBI check, and Employee #3 failed to provide evidence of a signed criminal history statement and evidence that fingerprints dated 7/17/09 had been submitted to the repository for state and FBI checks.  This was a repeat deficiency from the 11/5/08 State Licensure survey.  Severity: 2      Scope: 3	Y 105		
Y 172 SS=C	449.209(2) Health and Sanitation-Outside garbage  NAC 449.209 2. Containers used to store garbage outside of the facility must be kept reasonably clean and	Y 172		

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Y 172	Continued From page 2  must be covered in such a manner that rodents are unable to get inside the containers. At least once each week, the containers must be emptied and the contents of the containers must be removed from the premises of the facility.  This Regulation is not met as evidenced by: Based on observation on 9/1/09, the facility failed to ensure 5 of 5 the containers used to store garbage outside the facility were covered.  Severity: 1 Scope: 3	Y 172			
Y 250 SS=D	449.217(1) Kitchens-Equipment works; Clean and Sanitary  NAC 449.217 1. The equipment in a kitchen of a residential facility and the size of the kitchen must be adequate for the number of residents in the facility. The kitchen and the equipment must be clean and must allow for the sanitary preparation of food. The equipment must be in good working condition.  This Regulation is not met as evidenced by: Based on observation on 9/1/09, the facility failed to ensure the kitchen was clean. The top of the fridge, the cabinets above the fridge and the top of the hood of the stove were covered in dust. The fridge was located next to the stove.  Severity: 2 Scope: 1	Y 250			

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Y 272	Continued From page 3	Y 272			
Y 272 SS=C	449.2175(3) Service of Food - Menus  NAC 449.2175 3. Menus must be in writing, planned a week in advance, dated, posted and kept on file for 90 days.  This Regulation is not met as evidenced by: Based on observation and record review on 9/1/09, the facility failed to post a current menu and keep on file for 90 days. Employee #1 showed the surveyor menus from July, stated the administrator was the one who developed the menu and she was not provided with a menu for August or September.  Severity: 1 Scope: 3	Y 272			
Y 273 SS=E	449.2175(4) Service of Food - Special Diets  NAC 449.2175 4. A resident who has been placed on a special diet by a physician or dietitian must be provided a meal that complies with the diet. The administrator of the facility shall ensure that records of any modification to the menu to accommodate for special diets prescribed by a physician or dietitian are kept on file for at least 90 days.  This Regulation is not met as evidenced by: Based on observation and record review on 9/1/09, the facility failed to modify the menu for a low fat, low sodium and puree diet for 2 of 6 residents (Resident #4 and #5). Employee #1 stated she did not follow a low fat and low sodium	Y 273			

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Y 273	Continued From page 4  diet for resident #4. Resident #5 was prescribed a puree diet, Employee #1 stated she takes all ingredients and blends them together. For lunch on the day of the survey the caregiver stated she would blend the chicken and broccoli together.  Severity: 2    Scope: 2	Y 273		
Y 309 SS=E	449.218(8) Bedrooms - Entrance Lighting  NAC 449.218 8. There must be light outside the entrance to each bedroom to provide a resident with adequate lighting to reach safely a switch for turning on a light fixture inside the bedroom. Upon the request of a resident, bedside lighting must be provided.  This Regulation is not met as evidenced by: Based on observation and interview on 9/1/09, the facility failed to provide adequate lighting for 1 of 4 bedrooms. The facility failed to provide a working light in Bedroom #3 for Resident #2. The light switch in Bedroom #2 failed to turn on a light. There was a bedside lamp on the opposite side of the room, Employee #1 attempted to turn on the light, it was not plugged in. When the lamp was plugged in the light failed to work.  Severity: 2    Scope: 2	Y 309		
Y 530 SS=C	449.260(1)(e) Activities for Residents	Y 530		

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Y 530	Continued From page 5  NAC 449.260 (e) Provide for the residents at least 10 hours each week of scheduled activities that are suited to their interests and capacities.  This Regulation is not met as evidenced by: Based on observation, interview, and record review on 9/1/09, the facility failed to provide 10 hours of activities per week. An activity schedule was posted, no times were listed and interviews with residents revealed the facility did not provide the listed activities. The residents stated, and were observed to go for walks.  Severity: 1      Scope: 3	Y 530			
Y 557 SS=D	449.262(3)(a) Restriction on Use of Restraints  NAC 449.262 3. The members of the staff of a residential facility shall not: (a) Use restraints on any resident.  This Regulation is not met as evidenced by: Based on observation and interview on 9/1/09, the facility failed to not use restraints on 1 of 5 residents (Resident #2), by the use of a full bed rail.  Severity: 2      Scope: 1	Y 557			
Y 878 SS=F	449.2742(6)(a)(1) Medication / Change order	Y 878			

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Y 920	Continued From page 7  area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medication for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself without supervision may keep his medication in his room if the medication is kept in a locked container for which the facility has been provided a key.  This Regulation is not met as evidenced by: Based on observation 9/1/09, the facility failed to keep medications in a locked area. Medications belonging to Employee #2 and Employee #1's husband were found unsecured in two drawers in the kitchen, in a desk in the living room and in the closet of bedroom #1.  Severity: 2      Scope: 1	Y 920		
Y 936 SS=F	449.2749(1)(e) Resident file  NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical	Y 936		

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Y 936	<p>Continued From page 8</p> <p>information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto.</p> <p>This Regulation is not met as evidenced by: Based on record review on 9/1/09, the facility failed to ensure 2 of 5 residents complied with NAC 441A.380 regarding tuberculosis (Resident #3 and #5) which affected all residents. The facility failed to show evidence of an annual TB test for Resident #3 and a 2-step TB test for Resident #5.</p> <p>Severity: 2      Scope: 3</p>	Y 936		

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